

# Work Order ID 148200

Monday, June 27, 2016 11:41:34 AM

**\*148200\***

Page 1

Item ID: D3552-17

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Door Prop

Start Date: 6/20/2016 Start Qty: 2.00

Cust Item ID:

Required Date: 6/27/2016 Req'd Qty: 2.00

Customer:

Reference:

DAS

Run Start **\*NR1\***

Approvals:

Process Plan:

13

Date: JUN 27 2016

Tooling:

Date:

Stop **\*NR2\***

QC:

Date:

SPC (Y/N):

Date:

| Sequence ID/<br>Work Center ID | Operation<br>Description | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

| Draw Nbr | Revision Nbr |
|----------|--------------|
| D3552    | L            |

100 0.00

**\*100\***

PURCHASING

Purchasing

Memo

Purchasing

Issue P/O:

Purchase Part Number: B8-154-387-156NX

Supplier: LS Technologies

Certificate of conformity is required

4 JUN 28 2016 DAS 13 9-89

110 0.00

**\*110\***

Receive & Inspect for Damage & Mat'l Certs

Packaging

Memo

Packaging

Ensure certificate of conformity is attached

4 JUL 04 2016 DAS 6 9-89

120 0.00

**\*120\***

QC6- Inspect dimensions to drawing

QC

Memo

Quality Control

Test for correct pressure

(4) JUL 22 2016 DAS 38 9-89

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

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| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                            | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> |                                               | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width: 100%; border: none;"> <tr> <td style="border: none;">Skid-tube <input type="checkbox"/></td> <td style="border: none;">Cross tube <input type="checkbox"/></td> <td style="border: none;">Water Jet <input type="checkbox"/></td> <td style="border: none;">Engineering <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Machining <input type="checkbox"/></td> <td style="border: none;">Small Fab <input type="checkbox"/></td> <td style="border: none;">Prod. Eng. Coord. <input type="checkbox"/></td> <td style="border: none;">Quality <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Thermoforming <input type="checkbox"/></td> <td style="border: none;">Finishing <input type="checkbox"/></td> <td style="border: none;">Rec/Store/Packaging <input type="checkbox"/></td> <td style="border: none;">Other <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Large Fab <input type="checkbox"/></td> <td style="border: none;">Composite <input type="checkbox"/></td> <td style="border: none;">Supplier <input type="checkbox"/></td> <td></td> </tr> </table> |                                             |                                 |                                   |                                              |                                       | Skid-tube <input type="checkbox"/>     | Cross tube <input type="checkbox"/> | Water Jet <input type="checkbox"/>    | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/>       | Prod. Eng. Coord. <input type="checkbox"/>  | Quality <input type="checkbox"/>          | Thermoforming <input type="checkbox"/>    | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/>               | Large Fab <input type="checkbox"/>  | Composite <input type="checkbox"/>           | Supplier <input type="checkbox"/>         |                                                |                                        |                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             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| Skid-tube <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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| Thermoforming <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 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| Large Fab <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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| Root Cause                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             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| <table style="width: 100%; border: none;"> <tr><td style="border: none;">Environment <input type="checkbox"/></td><td style="border: none;">No Re-verification <input type="checkbox"/></td></tr> <tr><td style="border: none;">Design <input type="checkbox"/></td><td style="border: none;">Operator <input type="checkbox"/></td></tr> <tr><td style="border: none;">Doc/Data <input type="checkbox"/></td><td style="border: none;">Offset/Setup <input type="checkbox"/></td></tr> <tr><td style="border: none;">Equip/Tooling <input type="checkbox"/></td><td style="border: none;">Supplier <input type="checkbox"/></td></tr> <tr><td style="border: none;">Handling/Pre <input type="checkbox"/></td><td style="border: none;">Training <input type="checkbox"/></td></tr> <tr><td style="border: none;">Material <input type="checkbox"/></td><td style="border: none;">Use for Testing <input type="checkbox"/></td></tr> <tr><td style="border: none;">Internal Transport <input type="checkbox"/></td><td style="border: none;">Poor Information <input type="checkbox"/></td></tr> <tr><td style="border: none;">Tribal Knowledge <input type="checkbox"/></td><td style="border: none;">Rushing <input type="checkbox"/></td></tr> <tr><td style="border: none;">LOA <input type="checkbox"/></td><td style="border: none;">Product Improvement <input type="checkbox"/></td></tr> <tr><td style="border: none;">Substation <input type="checkbox"/></td><td style="border: none;">Process Improvement <input type="checkbox"/></td></tr> <tr><td style="border: none;">Past Expiry Date <input type="checkbox"/></td><td style="border: none;">Manufacturing Process <input type="checkbox"/></td></tr> <tr><td style="border: none;">Misidentified <input type="checkbox"/></td><td style="border: none;">Past Due <input type="checkbox"/></td></tr> </table> |                                                            |                                                                                                                                                                                    |                                               | Environment <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | No Re-verification <input type="checkbox"/> | Design <input type="checkbox"/> | Operator <input type="checkbox"/> | Doc/Data <input type="checkbox"/>            | Offset/Setup <input type="checkbox"/> | Equip/Tooling <input type="checkbox"/> | Supplier <input type="checkbox"/>   | Handling/Pre <input type="checkbox"/> | Training <input type="checkbox"/>    | Material <input type="checkbox"/>  | Use for Testing <input type="checkbox"/> | Internal Transport <input type="checkbox"/> | Poor Information <input type="checkbox"/> | Tribal Knowledge <input type="checkbox"/> | Rushing <input type="checkbox"/>   | LOA <input type="checkbox"/>                 | Product Improvement <input type="checkbox"/> | Substation <input type="checkbox"/> | Process Improvement <input type="checkbox"/> | Past Expiry Date <input type="checkbox"/> | Manufacturing Process <input type="checkbox"/> | Misidentified <input type="checkbox"/> | Past Due <input type="checkbox"/> | <table style="width: 100%; border: none;"> <tr><td style="border: none;">Pressure/Forced <input type="checkbox"/></td><td style="border: none;">Temperature/Cure <input type="checkbox"/></td><td style="border: none;">Power Loss/Surge <input type="checkbox"/></td><td style="border: none;">Positioned Wrong <input type="checkbox"/></td></tr> <tr><td style="border: none;">Bending <input type="checkbox"/></td><td style="border: none;">Set-up <input type="checkbox"/></td><td style="border: none;">Folio/Program <input type="checkbox"/></td><td style="border: none;">Outside Dimensions <input type="checkbox"/></td></tr> <tr><td style="border: none;">Centre Not Concentric <input type="checkbox"/></td><td style="border: none;">BOM/Route <input type="checkbox"/></td><td style="border: none;">Grain <input type="checkbox"/></td><td style="border: none;">Over/Under tolerance <input type="checkbox"/></td></tr> <tr><td style="border: none;">Cracks <input type="checkbox"/></td><td style="border: none;">Broken/Damage/Defect <input type="checkbox"/></td><td style="border: none;">Weld <input type="checkbox"/></td><td style="border: none;">Part Incorrect <input type="checkbox"/></td></tr> <tr><td style="border: none;">Crimp/Kink/Ripple/Wave <input type="checkbox"/></td><td style="border: none;">Inspection Incomplete/Unqualified <input type="checkbox"/></td><td style="border: none;">Wrong Stock Pulled <input type="checkbox"/></td><td style="border: none;">Part Lost/Missing <input type="checkbox"/></td></tr> <tr><td style="border: none;">Cuffs <input type="checkbox"/></td><td style="border: none;">Contamination <input type="checkbox"/></td><td style="border: none;">Out of Sequence <input type="checkbox"/></td><td style="border: none;">Part Moved <input type="checkbox"/></td></tr> <tr><td style="border: none;">Crushing <input type="checkbox"/></td><td style="border: none;">Countersink <input type="checkbox"/></td><td style="border: none;">Off-set <input type="checkbox"/></td><td style="border: none;">Drawing <input type="checkbox"/></td></tr> <tr><td style="border: none;">Heat Treat <input type="checkbox"/></td><td style="border: none;">Cut Too Short <input type="checkbox"/></td><td style="border: none;">Mislabeled <input type="checkbox"/></td><td style="border: none;">Finish <input type="checkbox"/></td></tr> <tr><td style="border: none;">Wave/Twist in Tube <input type="checkbox"/></td><td style="border: none;">Instructions Incomplete/Unclear <input type="checkbox"/></td><td style="border: none;">Fit/Function <input type="checkbox"/></td><td style="border: none;">Misread <input type="checkbox"/></td></tr> <tr><td style="border: none;">Marks/Chatter <input type="checkbox"/></td><td style="border: none;">Drill Holes <input type="checkbox"/></td><td style="border: none;">Misaligned/off center <input type="checkbox"/></td><td style="border: none;">Turning Sequence <input type="checkbox"/></td></tr> </table> |  |  |  |  |  | Pressure/Forced <input type="checkbox"/> | Temperature/Cure <input type="checkbox"/> | Power Loss/Surge <input type="checkbox"/> | Positioned Wrong <input type="checkbox"/> | Bending <input type="checkbox"/> | Set-up <input type="checkbox"/> | Folio/Program <input type="checkbox"/> | Outside Dimensions <input type="checkbox"/> | Centre Not Concentric <input type="checkbox"/> | BOM/Route <input type="checkbox"/> | Grain <input type="checkbox"/> | Over/Under tolerance <input type="checkbox"/> | Cracks <input type="checkbox"/> | Broken/Damage/Defect <input type="checkbox"/> | Weld <input type="checkbox"/> | Part Incorrect <input type="checkbox"/> | Crimp/Kink/Ripple/Wave <input type="checkbox"/> | Inspection Incomplete/Unqualified <input type="checkbox"/> | Wrong Stock Pulled <input type="checkbox"/> | Part Lost/Missing <input type="checkbox"/> | Cuffs <input type="checkbox"/> | Contamination <input type="checkbox"/> | Out of Sequence <input type="checkbox"/> | Part Moved <input type="checkbox"/> | Crushing <input type="checkbox"/> | Countersink <input type="checkbox"/> | Off-set <input type="checkbox"/> | Drawing <input type="checkbox"/> | Heat Treat <input type="checkbox"/> | Cut Too Short <input type="checkbox"/> | Mislabeled <input type="checkbox"/> | Finish <input type="checkbox"/> | Wave/Twist in Tube <input type="checkbox"/> | Instructions Incomplete/Unclear <input type="checkbox"/> | Fit/Function <input type="checkbox"/> | Misread <input type="checkbox"/> | Marks/Chatter <input type="checkbox"/> | Drill Holes <input type="checkbox"/> | Misaligned/off center <input type="checkbox"/> | Turning Sequence <input type="checkbox"/> |
| Environment <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   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| Material <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      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| Internal Transport <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            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| Pressure/Forced <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               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                                                   | Positioned Wrong <input type="checkbox"/>     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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| Bending <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       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                                                   | Outside Dimensions <input type="checkbox"/>   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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| Centre Not Concentric <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         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                                                   | Over/Under tolerance <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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| Cracks <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        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                                                   | Part Incorrect <input type="checkbox"/>       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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| Crimp/Kink/Ripple/Wave <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        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                                                   | Part Lost/Missing <input type="checkbox"/>    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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| Cuffs <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         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                                                   | Part Moved <input type="checkbox"/>           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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| Crushing <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      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| Heat Treat <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    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                                                   | Finish <input type="checkbox"/>               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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| Wave/Twist in Tube <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            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                                                   | Misread <input type="checkbox"/>              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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| Marks/Chatter <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 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                                                   | Turning Sequence <input type="checkbox"/>     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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**Work Order ID 148200**

Monday, June 27, 2016 11:41:34 AM

**\*148200\***

Page 2

Item ID: D3552-17

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Door Prop

Start Date: 6/20/2016 Start Qty: 2.00

**\*2\***

Cust Item ID:

Required Date: 6/27/2016 Req'd Qty: 2.00

**\*2\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
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130

Identify as per dwg & Stock Location: St353

0.00

**\*130\***

Packaging

Memo

0.00

Packaging

4 9808 JUL 2 5 2016

140

QC21- Final Inspection - Work Order Release

0.00

**\*140\***

QC

Memo

0.03

Quality Control

DAS  
21  
9-89

JUL 2 5 2016

DAS  
21  
9-89

JUL 2 5 2016

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

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| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                            | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> |                                               | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width:100%; border: none;"> <tr> <td style="border: none;">Skid-tube <input type="checkbox"/></td> <td style="border: none;">Cross tube <input type="checkbox"/></td> <td style="border: none;">Water Jet <input type="checkbox"/></td> <td style="border: none;">Engineering <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Machining <input type="checkbox"/></td> <td style="border: none;">Small Fab <input type="checkbox"/></td> <td style="border: none;">Prod. Eng. Coord. <input type="checkbox"/></td> <td style="border: none;">Quality <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Thermoforming <input type="checkbox"/></td> <td style="border: none;">Finishing <input type="checkbox"/></td> <td style="border: none;">Rec/Store/Packaging <input type="checkbox"/></td> <td style="border: none;">Other <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Large Fab <input type="checkbox"/></td> <td style="border: none;">Composite <input type="checkbox"/></td> <td style="border: none;">Supplier <input type="checkbox"/></td> <td></td> </tr> </table> |                                   |                                   |                                       |                                              |                                   | Skid-tube <input type="checkbox"/>    | Cross tube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/>     | Machining <input type="checkbox"/>          | Small Fab <input type="checkbox"/>        | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/>           | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/>               | Large Fab <input type="checkbox"/>        | Composite <input type="checkbox"/>             | Supplier <input type="checkbox"/>      |                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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| Skid-tube <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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| <b>Root Cause</b><br><table style="width:100%; border: none;"> <tr><td style="border: none;">Environment <input type="checkbox"/></td><td style="border: none;">No Re-verification <input type="checkbox"/></td></tr> <tr><td style="border: none;">Design <input type="checkbox"/></td><td style="border: none;">Operator <input type="checkbox"/></td></tr> <tr><td style="border: none;">Doc/Data <input type="checkbox"/></td><td style="border: none;">Offset/Setup <input type="checkbox"/></td></tr> <tr><td style="border: none;">Equip/Tooling <input type="checkbox"/></td><td style="border: none;">Supplier <input type="checkbox"/></td></tr> <tr><td style="border: none;">Handling/Pre <input type="checkbox"/></td><td style="border: none;">Training <input type="checkbox"/></td></tr> <tr><td style="border: none;">Material <input type="checkbox"/></td><td style="border: none;">Use for Testing <input type="checkbox"/></td></tr> <tr><td style="border: none;">Internal Transport <input type="checkbox"/></td><td style="border: none;">Poor Information <input type="checkbox"/></td></tr> <tr><td style="border: none;">Tribal Knowledge <input type="checkbox"/></td><td style="border: none;">Rushing <input type="checkbox"/></td></tr> <tr><td style="border: none;">LOA <input type="checkbox"/></td><td style="border: none;">Product Improvement <input type="checkbox"/></td></tr> <tr><td style="border: none;">Substation <input type="checkbox"/></td><td style="border: none;">Process Improvement <input type="checkbox"/></td></tr> <tr><td style="border: none;">Past Expiry Date <input type="checkbox"/></td><td style="border: none;">Manufacturing Process <input type="checkbox"/></td></tr> <tr><td style="border: none;">Misidentified <input type="checkbox"/></td><td style="border: none;">Past Due <input type="checkbox"/></td></tr> </table> |                                                            | Environment <input type="checkbox"/>                                                                                                                                               | No Re-verification <input type="checkbox"/>   | Design <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Operator <input type="checkbox"/> | Doc/Data <input type="checkbox"/> | Offset/Setup <input type="checkbox"/> | Equip/Tooling <input type="checkbox"/>       | Supplier <input type="checkbox"/> | Handling/Pre <input type="checkbox"/> | Training <input type="checkbox"/>   | Material <input type="checkbox"/>  | Use for Testing <input type="checkbox"/> | Internal Transport <input type="checkbox"/> | Poor Information <input type="checkbox"/> | Tribal Knowledge <input type="checkbox"/>  | Rushing <input type="checkbox"/> | LOA <input type="checkbox"/>           | Product Improvement <input type="checkbox"/> | Substation <input type="checkbox"/>          | Process Improvement <input type="checkbox"/> | Past Expiry Date <input type="checkbox"/> | Manufacturing Process <input type="checkbox"/> | Misidentified <input type="checkbox"/> | Past Due <input type="checkbox"/> | <b>FAULT CATEGORY</b><br><table style="width:100%; 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| Handling/Pre <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  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| Material <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      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| Internal Transport <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            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| Tribal Knowledge <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              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| LOA <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           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| Substation <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    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| Past Expiry Date <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              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| Misidentified <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 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| Pressure/Forced <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               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| Bending <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       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| Centre Not Concentric <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         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| Cracks <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        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| Crimp/Kink/Ripple/Wave <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        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| Cuffs <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         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| Crushing <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      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| Heat Treat <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    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                                                                       | Finish <input type="checkbox"/>               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 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      |                                        |                                          |                                     |                                   |                                      |                                  |                                  |                                     |                                        |                                     |                                 |                                             |                                                          |                                       |                                  |                                        |                                      |                                                |                                           |
| Wave/Twist in Tube <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Instructions Incomplete/Unclear <input type="checkbox"/>   | Fit/Function <input type="checkbox"/>                                                                                                                                              | Misread <input type="checkbox"/>              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                   |                                   |                                       |                                              |                                   |                                       |                                     |                                    |                                          |                                             |                                           |                                            |                                  |                                        |                                              |                                              |                                              |                     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      |                                        |                                          |                                     |                                   |                                      |                                  |                                  |                                     |                                        |                                     |                                 |                                             |                                                          |                                       |                                  |                                        |                                      |                                                |                                           |
| Marks/Chatter <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Drill Holes <input type="checkbox"/>                       | Misaligned/off center <input type="checkbox"/>                                                                                                                                     | Turning Sequence <input type="checkbox"/>     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                   |                                   |                                       |                                              |                                   |                                       |                                     |                                    |                                          |                                             |                                           |                                            |                                  |                                        |                                              |                                              |                                              |                     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      |                                        |                                          |                                     |                                   |                                      |                                  |                                  |                                     |                                        |                                     |                                 |                                             |                                                          |                                       |                                  |                                        |                                      |                                                |                                           |
| OTHER :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                            |                                                                                                             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      |                                        |                                          |                                     |                                   |                                      |                                  |                                  |                                     |                                        |                                     |                                 |                                             |                                                          |                                       |                                  |                                        |                                      |                                                |                                           |

# Picklist Print

Monday, June 27, 2016 11:41:34 AM

Page 1

Work Order ID: 148200

**\*148200\***

Parent Item: D3552-17

**\*D3552-17\***

Parent Item Name: Door Prop

Start Date: 6/20/2016

Required Date: 6/27/2016

Start Qty: 2.00

Required Qty: 2.00

Comments: IPP Rev:A 10.09.24 new issue DD verf:EC  
10.12.03 as per dwg rev.G DD verf:EC  
PER ECN12-624 DD verf:EC

IPP Rev:B  
IPP Rev:C 12.07.30 AS

| Component Item ID/<br>Item Name | Replacement<br>Item ID | Mfg/<br>Purch | Bin<br>Item | Primary<br>Location | Last<br>Location | Route<br>Seq ID | Unit of<br>Measure | Qty on<br>Hand | Qty per Kit | Total<br>Qty | Qty<br>Issued | Date<br>Issued | Status |
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
| B8-154-387-156NX                |                        | Purchased     |             | No                  |                  | 110             | Each               | 0.0000         | 1           | 24           |               |                |        |
| <b>*B8-154-387-156NX*</b>       |                        |               |             |                     |                  |                 |                    |                |             | **           |               |                |        |

Gas Spring

JUL 04 2016

DMS  
6  
9-89

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

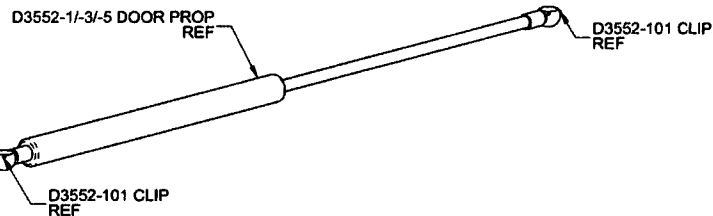
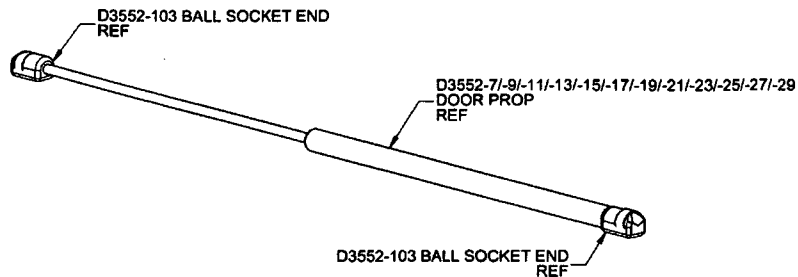
QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

|                                                              |  |                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                              |                                                                                                                   |                                              |  |
|--------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |  | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> |  | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>             Skid-tube <input type="checkbox"/><br/>             Machining <input type="checkbox"/><br/>             Thermoforming <input type="checkbox"/><br/>             Large Fab <input type="checkbox"/> </div> <div>             Cross tube <input type="checkbox"/><br/>             Small Fab <input type="checkbox"/><br/>             Finishing <input type="checkbox"/><br/>             Composite <input type="checkbox"/> </div> <div>             Water Jet <input type="checkbox"/><br/>             Prod. Eng. Coord. <input type="checkbox"/><br/>             Rec/Store/Packaging <input type="checkbox"/><br/>             Supplier <input type="checkbox"/> </div> <div>             Engineering <input type="checkbox"/><br/>             Quality <input type="checkbox"/><br/>             Other <input type="checkbox"/> </div> </div> |  |                              |                                                                                                                   |                                              |  |
| Date :                                                       |  | Step #:                                                                                                                                                                            |  | QTY Effective :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                              | <b>MRB (QSI042) Approval</b><br><br><div style="border: 1px solid black; height: 150px; margin-top: 10px;"></div> |                                              |  |
| Description Work Order Deviation                             |  |                                                                                                                                                                                    |  | Disposition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                              |                                                                                                                   |                                              |  |
|                                                              |  |                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                              |                                                                                                                   |                                              |  |
|                                                              |  |                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                              |                                                                                                                   | Completed By                                 |  |
|                                                              |  |                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                              |                                                                                                                   | Lead hand / Supervisor Approval Verification |  |
|                                                              |  |                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | QC / QA Coordinator Approval |                                                                                                                   |                                              |  |

| Root Cause                                  |                          |                       |                          | FAULT CATEGORY         |                          |                                   |                          |
|---------------------------------------------|--------------------------|-----------------------|--------------------------|------------------------|--------------------------|-----------------------------------|--------------------------|
| Environment <input type="checkbox"/>        | <input type="checkbox"/> | No Re-verification    | <input type="checkbox"/> | Pressure/Forced        | <input type="checkbox"/> | Temperature/Cure                  | <input type="checkbox"/> |
| Design <input type="checkbox"/>             | <input type="checkbox"/> | Operator              | <input type="checkbox"/> | Bending                | <input type="checkbox"/> | Set-up                            | <input type="checkbox"/> |
| Doc/Data <input type="checkbox"/>           | <input type="checkbox"/> | Offset/Setup          | <input type="checkbox"/> | Centre Not Concentric  | <input type="checkbox"/> | BOM/Route                         | <input type="checkbox"/> |
| Equip/Tooling <input type="checkbox"/>      | <input type="checkbox"/> | Supplier              | <input type="checkbox"/> | Cracks                 | <input type="checkbox"/> | Broken/Damage/Defect              | <input type="checkbox"/> |
| Handling/Pre <input type="checkbox"/>       | <input type="checkbox"/> | Training              | <input type="checkbox"/> | Crimp/Kink/Ripple/Wave | <input type="checkbox"/> | Inspection Incomplete/Unqualified | <input type="checkbox"/> |
| Material <input type="checkbox"/>           | <input type="checkbox"/> | Use for Testing       | <input type="checkbox"/> | Cuffs                  | <input type="checkbox"/> | Contamination                     | <input type="checkbox"/> |
| Internal Transport <input type="checkbox"/> | <input type="checkbox"/> | Poor Information      | <input type="checkbox"/> | Crushing               | <input type="checkbox"/> | Countersink                       | <input type="checkbox"/> |
| Tribal Knowledge <input type="checkbox"/>   | <input type="checkbox"/> | Rushing               | <input type="checkbox"/> | Heat Treat             | <input type="checkbox"/> | Cut Too Short                     | <input type="checkbox"/> |
| LOA <input type="checkbox"/>                | <input type="checkbox"/> | Product Improvement   | <input type="checkbox"/> | Wave/Twist in Tube     | <input type="checkbox"/> | Instructions Incomplete/Unclear   | <input type="checkbox"/> |
| Substation <input type="checkbox"/>         | <input type="checkbox"/> | Process Improvement   | <input type="checkbox"/> | Marks/Chatter          | <input type="checkbox"/> | Drill Holes                       | <input type="checkbox"/> |
| Past Expiry Date <input type="checkbox"/>   | <input type="checkbox"/> | Manufacturing Process | <input type="checkbox"/> | <b>OTHER :</b>         |                          |                                   |                          |
| Misidentified <input type="checkbox"/>      | <input type="checkbox"/> | Past Due              | <input type="checkbox"/> |                        |                          |                                   |                          |

# SPECIFICATION CONTROL DRAWING



JUN 27 2016

DAS  
13  
9-89

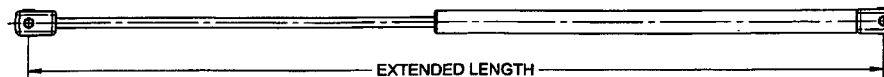
W10.148200

RELEASED  
2015-08-04  
ECN 15-609

|      |                                                                                                                                                                                                                  |     |          |
|------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------|
| L    | ADD P/N D3552-29                                                                                                                                                                                                 | VS  | 15.04.13 |
| K    | ADD "X" TO LS TECHNOLOGIES P/Ns TO DESIGNATE "EXTRA DAMPING" FOR D3552-15/-17/-19/-25/-27. REASON: PAR12-209.                                                                                                    | MB  | 12.07.16 |
| J    | ADD P/N D3552-25/-27. REMOVE ALTERNATE PART NUMBER FOR -15, -17 AND -19. STROKE FOR -15, -17 AND -19 WAS 139/8.08 NOW 154/8.08. EXTENDED LENGTH FOR -15, -17 AND -19 WAS 388/15.2 NOW 387/15.2                   | AP  | 11.12.07 |
| I    | ADD P/N D3552-23                                                                                                                                                                                                 | RF  | 11.10.11 |
| H    | ADD P/N D3552-21                                                                                                                                                                                                 | DC  | 11.03.10 |
| G    | FOR -15, FORCE: 300/67.4 WAS 400/89.9, SUPPLIER P/N B8-154-387-300N WAS B8-154-387-400N; FOR -17, STROKE: 139/5.47 WAS 180/8.30, EXT LG: 396/15.2 WAS 407/16.0, SUPPLIER P/N B8-154-387-150N WAS B8-167-408-156N | JPH | 10.11.01 |
| F    | ADD P/N D3552-15/-17/-19 AND ALTERNATE SUPPLIER                                                                                                                                                                  | JPH | 10.07.27 |
| E    | ADD P/N D3552-13 ZN B8-1, A8-1, D6-1, CHANGE NAME FROM "GAS SPRING" TO "DOOR PROP" THROUGH OUT DWG                                                                                                               | HS  | 10.02.03 |
| D    | ADD P/N D3552-101 ZN D6-1, C7-1, C1-1 AND D3552-103 ZN D1-1 AND C2-1 AND ZN B8-1; ADD NOTE REGARDING D3552-101 AND D3552-103 COMPATIBILITY ZN A8-1                                                               | HS  | 09.04.02 |
| C    | ADD D3552-11 AND CONVERSIONS FOR INSPECTION; UPDATE P/N FOR D3552-7                                                                                                                                              | LE  | 07.06.01 |
| B    | ADD D3552-7/-9; UPDATE DESC. D3552-1/-3/-5                                                                                                                                                                       | LE  | 06.10.24 |
| A    | NEW ISSUE                                                                                                                                                                                                        | LE  | 06.09.15 |
| REV. | DESCRIPTION                                                                                                                                                                                                      | BY  | DATE     |

APPROVED

|            |          |                                                                                                                                                                                                                                                                          |              |
|------------|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| DESIGN     | VS       | DART AEROSPACE LTD<br>HAWKESBURY, ONTARIO, CANADA                                                                                                                                                                                                                        |              |
| DRAWN      | VS       |                                                                                                                                                                                                                                                                          |              |
| CHECKED    | AK       | DRAWING NO.                                                                                                                                                                                                                                                              | REV. L       |
| MFG. APPR. | DD       | D3552                                                                                                                                                                                                                                                                    | SHEET 1 OF 2 |
| APPROVED   | HS       | TITLE                                                                                                                                                                                                                                                                    | SCALE        |
| DE APPR.   | DS       | DOOR PROP                                                                                                                                                                                                                                                                | NTS          |
| DATE       | 15.04.13 | COPYRIGHT © 2008 BY DART AEROSPACE LTD<br>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD. |              |



| DART PART NUMBER | DESCRIPTION               | STROKE (mm/in) | EXTENDED LENGTH (mm/in) | FORCE (N/lb) | END FITTING            | MATERIAL     | SUPPLIER        | SUPPLIER PART NUMBER OR MODEL NUMBER |
|------------------|---------------------------|----------------|-------------------------|--------------|------------------------|--------------|-----------------|--------------------------------------|
| D3552-1          | DOOR PROP                 | 220/8.66       | 530/20.6                | 70/15.7      | 10mm SS BALL SOCKET    | CARBON STEEL | LS TECHNOLOGIES | C8-220-530-070N                      |
| D3552-3          | DOOR PROP                 | 200/7.87       | 490/19.3                | 200/45.0     | 10mm SS BALL SOCKET    | CARBON STEEL | LS TECHNOLOGIES | C8-200-490-200N                      |
| D3552-5          | DOOR PROP                 | 175/6.89       | 430/16.9                | 150/33.7     | 10mm SS BALL SOCKET    | CARBON STEEL | LS TECHNOLOGIES | C8-175-430-150N                      |
| D3552-7          | DOOR PROP                 | 220/8.66       | 530/20.9                | 70/15.7      | 10mm NYLON BALL SOCKET | CARBON STEEL | LS TECHNOLOGIES | B8-220-530-070N                      |
| D3552-9          | DOOR PROP                 | 200/7.87       | 490/19.3                | 200/45.0     | 10mm NYLON BALL SOCKET | CARBON STEEL | LS TECHNOLOGIES | B8-200-490-200N                      |
| D3552-11         | DOOR PROP                 | 240/9.45       | 575/22.6                | 150/33.7     | 10mm NYLON BALL SOCKET | CARBON STEEL | LS TECHNOLOGIES | B8-240-575-150N                      |
| D3552-13         | DOOR PROP                 | 220/8.66       | 530/20.9                | 140/31.5     | 10mm NYLON BALL SOCKET | CARBON STEEL | LS TECHNOLOGIES | B8-220-530-140N                      |
| D3552-15         | DOOR PROP W/EXTRA DAMPING | 154/6.06       | 387/15.2                | 300/67.4     | 10mm NYLON BALL SOCKET | CARBON STEEL | LS TECHNOLOGIES | B8-154-387-300NX                     |
| D3552-17         | DOOR PROP W/EXTRA DAMPING | 154/6.06       | 387/15.2                | 156/35.1     | 10mm NYLON BALL SOCKET | CARBON STEEL | LS TECHNOLOGIES | B8-154-387-156NX                     |
| D3552-19         | DOOR PROP W/EXTRA DAMPING | 154/6.06       | 387/15.2                | 60/13.5      | 10mm NYLON BALL SOCKET | CARBON STEEL | LS TECHNOLOGIES | B8-154-387-060NX                     |
| D3552-21         | DOOR PROP                 | 167/6.57       | 410/16.1                | 70/15.7      | 10mm NYLON BALL SOCKET | CARBON STEEL | LS TECHNOLOGIES | B8-167-410-070N                      |
| D3552-23         | DOOR PROP                 | 190/7.48       | 475/18.7                | 70/15.7      | 10mm NYLON BALL SOCKET | CARBON STEEL | LS TECHNOLOGIES | B8-190-475-070N                      |
| D3552-25         | DOOR PROP W/EXTRA DAMPING | 148/5.83       | 475/18.7                | 300/67.4     | 10mm NYLON BALL SOCKET | CARBON STEEL | LS TECHNOLOGIES | B8-148-475-300NX                     |
| D3552-27         | DOOR PROP W/EXTRA DAMPING | 148/5.83       | 475/18.7                | 156/35.1     | 10mm NYLON BALL SOCKET | CARBON STEEL | LS TECHNOLOGIES | B8-148-475-156NX                     |
| D3552-29         | DOOR PROP                 | 190/7.48       | 475/18.7                | 100/22.5     | 10mm NYLON BALL SOCKET | CARBON STEEL | LS TECHNOLOGIES | B8-190-475-100N                      |
| D3552-101        | CLIP                      | N/A            | N/A                     | N/A          | N/A                    | CARBON STEEL | LS TECHNOLOGIES | C9                                   |
| D3552-103        | BALL SOCKET END           | N/A            | N/A                     | N/A          | N/A                    | NYLON        | LS TECHNOLOGIES | B10                                  |

# **D3552-X DOOR PROP**

RELEASED  
2015-08-04

## **NOTES:**

- 1) IDENTIFICATION: IDENTIFY PER QSI 044 6.2
- 2) D3552-101 CLIP IS ONLY COMPATIBLE WITH D3552-1/-3/-5 DOOR PROPS
- 3) D3552-103 BALL SOCKET END IS ONLY COMPATIBLE WITH D3552-7/-9/-11/-13/-15/-17/-19/-21/-23/-25/-27/-29 DOOR PROPS

|            |          |                                                                                                                                                                                                                                                                           |              |
|------------|----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| DESIGN     | VS       | <b>DART AEROSPACE LTD</b><br>HAWKESBURY, ONTARIO, CANADA                                                                                                                                                                                                                  |              |
| DRAWN      | VS       |                                                                                                                                                                                                                                                                           |              |
| CHECKED    | AK       | DRAWING NO.                                                                                                                                                                                                                                                               | REV. L       |
| MFG. APPR. | DD       | <b>D3552</b>                                                                                                                                                                                                                                                              | SHEET 2 OF 2 |
| APPROVED   | HS       | TITLE                                                                                                                                                                                                                                                                     | SCALE        |
| DE APPR.   | DS       | <b>DOOR PROP</b>                                                                                                                                                                                                                                                          | NTS          |
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Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID PO32865

Purchase Order Date 6/28/2016

PO Print Date 6/28/2016

Page Number 1 of 2

Order From :

VC-LST0001

Ship To : DART AEROSPACE LTD

LS TECHNOLOGIES INC.  
314 JESSOP AVE  
SASKATOON, SK S7N 1Y6  
CA

1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

**E-MAILED**  
JUN 28 2016

Contact Name

Vendor Phone 306 683 5000

Buyer

Chantal Lavoie

Customer POID

Customer Tax # 10127-2607

Terms

Net 30

Currency

CAD

FOB

EXW - (Ex Works)

Ship To Contact

Ship To Phone

Ship Via: FedEx Overnight collect

Ship Acct:

| Line Nbr | Reference Vendor Part Number<br>Line Comments<br>Delivery Comments | Description/<br>Mfg ID | Req Date/<br>Taxable<br>Promise Date | CD | Req Qty/<br>Unit of<br>Measure | PO Unit Price | Extended Price |
|----------|--------------------------------------------------------------------|------------------------|--------------------------------------|----|--------------------------------|---------------|----------------|
| 1        | B8-240-575-150N                                                    | GAS SPRING             | 7/4/2016<br>Yes<br>7/4/2016          |    | 8.00<br>Each                   | \$41.36       | \$330.91       |

AS PER DWG D3552-11 REV. L  
B148197

Line Total: \$330.91

|   |                  |            |                             |  |              |         |          |
|---|------------------|------------|-----------------------------|--|--------------|---------|----------|
| 2 | B8-154-387-156NX | Gas Spring | 7/4/2016<br>Yes<br>7/4/2016 |  | 4.00<br>Each | \$26.50 | \$106.00 |
|---|------------------|------------|-----------------------------|--|--------------|---------|----------|

AS PER DWG D3552-17 REV. L  
B148200

10/7/14

Line Total: \$106.00

PO Instructions: Fedex Acc#151793240

Note:

6/28/2016

LS Technologies Inc  
314 Jessop Ave  
Saskatoon, SK S7N 1Y6

Ph: 306-683-5000 Fax: 306-683-6403

# Packing Slip

| P.O. No. | Date      | Invoice # |
|----------|-----------|-----------|
| 32865    | 6/29/2016 | 15070     |

|                                                                   |
|-------------------------------------------------------------------|
| Bill to:                                                          |
| Dart Aerospace Ltd<br>1270 Aberdeen St.<br>Hawkesbury, ON K6A 1K7 |

|                                                                                                   |
|---------------------------------------------------------------------------------------------------|
| Ship to:                                                                                          |
| Main Finished Goods Location<br>Dart Aerospace Ltd<br>1270 Aberdeen St.<br>Hawkesbury, ON K6A 1K7 |

| Ship      | Via    | FOB |
|-----------|--------|-----|
| 6/29/2016 | Fed-Ex |     |

| Qty                                         | Description                 |
|---------------------------------------------|-----------------------------|
| 8                                           | D3552-11 B148197 Gas spring |
| 4                                           | D3552-17 B148200 Gas Spring |
| Shipping Via FED EX Tracking # 776638998133 |                             |

Order checked by :

*[Signature]*



LS Technologies Inc  
314 Jessop Ave  
Saskatoon, SK, S7N 1Y6  
Ph: (306) 683-5000 Fax: (306) 683-6403

### **Certificate of Compliance**

June 29, 2016

This is to certify that the parts listed below meets specifications as required by your order.

**8 Units: D3552-11 B148197 Gas Spring**

**4 Units: D3552-17 B148200 Gas Spring**

**Country of Manufacture: Canada**  
**Date of Manufacture : June 29, 2016**  
**This product is ROHS compliant.**

**Purchase Order # 32865**  
**Invoice # 15070**

L S Technologies Inc Canada

A handwritten signature in black ink, appearing to be 'N. Fehr', written over a horizontal line.

Nolan Fehr  
Manager